

ORDER FOR SUPPLIES OR SERVICES

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IMPORTANT: Mark all packages and papers with contract and/or order numbers.

1. DATE OF ORDER 08/11/2004		2. CONTRACT NO. (If any) DTMA8C00020		6. SHIP TO: Timothy Cogan	
3. ORDER NO. KEY26W04021		4. REQUISITION/REFERENCE NO. PRWR0400315		a. NAME OF CONSIGNEE DOT/Maritime Administration, WR Operations	
5. ISSUING OFFICE (Address correspondence to) DOT/Maritime Administration, WR Acquisition 201 Mission Street, Suite 2200 San Francisco CA 94105-1905				b. STREET ADDRESS CAPE ORLANDO	
				c. CITY SAN FRANCISCO	e. ZIP CODE 94105
7. TO: a. NAME OF CONTRACTOR Mr. Louis Cavaliere				f. SHIP VIA	
b. COMPANY NAME KEYSTONE SHIPPING SERVICES INC				8. TYPE OF ORDER	
c. STREET ADDRESS SUITE 600-ONE BALA PLAZA EAST				<input type="checkbox"/> a. PURCHASE REFERENCE YOUR: Please furnish the following on the terms and conditions specified on both sides of this order and on the attached sheet, if any, including delivery as indicated.	
d. CITY Bala Cynwyd	e. STATE PA	f. ZIP CODE 19004-1496		<input type="checkbox"/> b. DELIVERY - Except for billing instructions on the reverse, this delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.	
9. ACCOUNTING AND APPROPRIATION DATA - 04 - X303 - 9 - 04 - 64 - - VORF - 4100 - - 254S - - 0464 - 0000 - - -				10. REQUISITIONING OFFICE DOT/Maritime Administration, Western Region	

11. BUSINESS CLASSIFICATION (Check appropriate box(es)) <input checked="" type="checkbox"/> a. SMALL <input type="checkbox"/> b. OTHER THAN SMALL <input type="checkbox"/> c. DISADVANTAGED <input type="checkbox"/> d. WOMEN-OWNED							
12. F.O.B. POINT Destination		14. GOVERNMENT B/L NO.		15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date) 08/30/2004		16. DISCOUNT TERMS 10 days % 20 days % 30 days % days %	
13. PLACE OF a. INSPECTION b. ACCEPTANCE							

17. SCHEDULE (See reverse for Rejections)

ITEM NO. (a)	SUPPLIES OR SERVICES (b)		QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	SEE LINE ITEM DETAIL						
SEE BILLING INSTRUCTIONS ON REVERSE	18. SHIPPING POINT	19. GROSS SHIPPING WEIGHT	20. INVOICE NO.				17(h) TOT. (Cont. pages)
	21. MAIL INVOICE TO:Ms. Susan Wong						
	a. NAME DOT/Maritime Administration, WR Finance						
	b. STREET ADDRESS (or P.O. Box) 201 Mission St, Suite 2200						17(i) GRAND TOTAL
	c. CITY San Francisco		d. STATE CA	e. ZIP CODE 94105		\$0.00	

22. UNITED STATES OF AMERICA BY (Signature) 		23. NAME (Typed) Debra K. Velmore TITLE: CONTRACTING/ORDERING OFFICER	
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RECEIVING REPORT

SHIPMENT	PARTIAL		DATE RECEIVED	SIGNATURE OF AUTHORIZED U.S. GOV'T REP.	DATE
NUMBER	FINAL				
TOTAL CONTAINERS	GROSS WEIGHT		RECEIVED AT	TITLE	

[illegible]

**ORDER FOR SUPPLIES OR SERVICES
SCHEDULE - CONTINUATION**

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IMPORTANT: Mark all packages and papers with contract and/or order numbers.

DATE OF ORDER 08/11/2004		CONTRACT NO. DTMA8C00020		ORDER NO. KEY26W04021		
ITEM NO. (a)	SUPPLIES OR SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
0001	<p><i>CLIN 5002AL GRP 26 VORF</i></p> <p>CLIN 5002AL CAPE ORLANDO GRP 26 VORF Reimbursable Items</p> <hr/> <p>FURNISH LABOR, MATERIAL, SERVICES, AND OWN STAFF AS DIRECTED TO ACTIVATE THE VESSEL FOR NO-NOTICE ACTIVATION FOR SERVICE IN ACCORDANCE WITH THE SHIP MANAGER CONTRACT ACTIVATION PLAN.</p> <p>ACTIVATION FUNDING AVAILABLE FROM VORF. TOTAL OF ALL WORK ORDERS NOT TO EXCEED \$250,000.</p> <p>FIRST DAY OF PHASE V (ACTIVATION): AUG 09, 04.</p> <p>THIS FUNDING DOCUMENT IS YOUR AUTHORIZATION TO ISSUE SUBCONTRACTS, USING YOUR SMALL PURCHASE PROCUREMENT PROCEDURES.</p> <p>THE WORK/SERVICES AUTHORIZED HEREIN SHALL BE ACCOMPLISHED UTILIZING THE SHIP MANAGER'S OWN WORKFORCE.</p> <p><i>Delivery Date</i> 08/30/2004</p> <p>Reference Requisition: PRWR0400315</p> <p><i>Electronic DISTRIBUTION:</i> 4400 S Wong, 4700 C Johnston/T. Cogan; Ship Manager</p> <hr/>	1.00	JOB	0.000	0.00	

TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17i) ➡ \$0.00